PTO/SB/01A (10-01)

Approved for use through 10/31/2002, OMB 0551-0032 U.S. Petent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

> Application No. \_\_\_\_\_\_\_, filed on July 13, 2004 as amended on \_\_\_\_\_(if applicable);

Title of Invention | BI-DIRECTIONAL SIGNAL INTERFACE

The attached application, or

As the below named inventor(s), I/we declare that:

This declaration is directed to:

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;
$\it l/$ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.
All statements made herein of mylown knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.
FULL NAME OF INVENTOR(S)
Inventor one: Charles Cox
Signature: Challes A: CAPITS Citizen of: USA
Inventor two: Ed Ackerman
Signature: Citizen of: USA
Inventor three:
Signature: Citizen of:
Inventor four:
Signature: Citizen of:
Additional inventors are being named onadditional form(s) attached hereto.
Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPT to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will value

depending upon the hands of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Parent and Tradamark Office, Washington, DC 20231, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patient, Washington, DC 20231.